## (I) THE USUAL, CUSTOMARY, AND REASONABLE CHARGES OF A DIETITIAN OR NUTRITIONIST SHALL BE ADDED TO THE HOSPITAL'S CHARGES; AND

## (II) THE DIETITIAN OR NUTRITIONIST MAY NOT SEPARATELY BILL THE PATIENT FOR COVERED SERVICES.

## 477AA.

- (a) Notwithstanding any provision of a group or individual policy or contract, including profit and nonprofit health plans, or any certificate issued thereunder, of health, sickness, accident, or disability insurance, delivered or issued for delivery within the State, whenever such policy, contract, or certificate provides for reimbursement for any service which is within the lawful scope of practice of a health care provider duly licensed under the Health Occupations Article, the insured, or any other person covered by, or entitled to reimbursement under, the policy, contract, or certificate, shall be entitled to reimbursement for such service. The provisions of this section apply to all such policies, contracts, or certificates issued, renewed, modified, altered, amended, or reissued on or after July 1, 1984.
- (b) (1) Notwithstanding any other section of this article, whenever liability and amount are reasonably clear, an insurer shall reimburse any person entitled to reimbursement under subsection (a) of this section or any hospital or related institution defined in § 19–301 of the Health General Article entitled to reimbursement within 30 days of the proper filing of a claim together with all necessary documentation.
- (2) (i) If an insurer fails to comply with paragraph (1) of this subsection, the insurer shall pay interest on the amount of the claim that remains unpaid 30 days after the filing of the claim.
- (ii) 1. If an insurer fails to comply with subparagraph (i) of this paragraph, the insurer shall pay interest on the amount of the claim that remains unpaid 30 days after the filing of the claim.
- 2. The interest paid under this subparagraph shall be at the monthly rate of:
  - A. 1.5 percent from the 31st day through the 60th day;
  - B. 2 percent from the 61st day through the 120th day; and
  - C. 2.5 percent after the 120th day;

and shall be included in any late reimbursement without the necessity for any claim for that interest to be made by the person, hospital, or related institution filing the original claim.

(3) The provisions of this subsection do not apply to claims with respect to which there is a good faith dispute regarding the legitimacy of the claim or the appropriate amount of reimbursement.